

1st. Was Samuel B. Clark's tumour of the ulnar nerve a true neuroma?

2d. Is neuroma naturally *benign*, and does it sometimes degenerate into malignant disease?

3d. The small cutaneous tumours having been found by several observers clinically and microscopically identical with medullary cancer, how is it that such a crop of that disease has grown so inoffensively 30, 40, and 50 years on these three persons?

4th. Is it not possible or even probable that these tumours originate in minute cutaneous nerves, by reason of which their malignant tendency is modified or controlled, perhaps at the expense of intellect or some other manifestation of nerve power?

These inquiries open a field for research where the annals of clinical surgery and pathology afford but little information. With the hope of pursuing this inquiry farther, I invoke the aid of the readers and contributors of this Journal to elucidate this rare and obscure disease.

ART. III.—*Inversion of the Hairs of the Labia Pudenda.* By C. D. MEIGS, M. D., Emeritus Prof. of Midwifery in Jefferson Medical College. In a letter to the Editor.

MY DEAR SIR: Since I saw you yesterday I have found, at page 95 of my "Letters to the Class," 4th edition, the relation of a case of pruritus vulvæ closely resembling that of our patient, Mrs. ———, and which was the subject of our conference.

The late Dr. ——— had for some time had charge of the young lady, aged about 20 years, and suffering greatly from continual pruritus and heat of the vulva. Finding himself baffled in his trials of cures, he at length asked leave to make a physical diagnosis; and you may infer as to the severity of the young lady's distress that could induce her to yield assent to so trying a demand.

The inspection of the parts did not, however, provide for the Doctor means of cure more efficient than the preceding ones; so that, the various washes and even the application of nitrate of silver having failed, he gave it over to me.

I was much surprised, on inquiry, to find the margins of each of the labia studded with long, straight, and stiff hairs, just like eyelashes, all of them directed inwards, and so, constantly teasing, irritating and vexing the mucous body of the interior, and producing a redness or florid tint of the membrane, with heat and the intolerable itching of which she so long had complained. I was struck with the analogy of the situation to that of the conjunctiva in those cases of conjunctivitis which you have often found to

depend upon inversion of eyelashes or trichiasis. It was a case of real trichiasis, not before described, and probably not before noticed. I at least had not met with any such notice in the books.

I directed the offending hairs to be gradually eradicated by tweezers, which the lady's nurse accomplished after some days, and the patient was thus cured of an *incurable disorder*.

Now, my dear sir, our patient is in precisely a similar condition, both as to the distress and the cause of that distress; and I confidently expect that if she will accomplish the eradication of the offending lashes, "whose name is legion," she will find herself delivered from the annoyance.

You, who know as well as I do, how obstinate and how intractable are many of the cases of pruritus, will do, I think, a service to many distressed people, and shed a little beam of light on the path of many a bewildered colleague if your widely known journal should assist to spread this little item of useful knowledge where my work has not been able to extend it.

I am, dear Doctor,

With the truest esteem,

Your obliged servant,

CH. D. MEIGS.

710 Walnut St., Jan. 28, 1862.

ART. IV.—*Induction of Premature Labour*. By C. D. MEIGS, M. D.,
Emeritus Prof. of Midwifery in Jefferson Medical College. In a letter
to the Editor.

DEAR SIR: I am not rarely consulted by medical gentlemen at a distance on the subject of premature labour and on forced abortion supposed to be rendered necessary by an ascertained deformity of the pelvis. Having had two such letters to answer this week, I considered that it might comport with the purposes of your excellent journal to say in it what appears to me to be the most advisable method in such cases. If you should publish this note it might not only prove acceptable to some of your readers, but it would save my time, in the way of answering inquiries.

Dr. Karl Braun, of Vienna, proposed, a few years ago, to open the os uteri by means of what he called a COLPEURYNTER, which is a small delicate bag or bladder composed of vulcanized rubber, to which is attached a syringe and a stop. This bladder, not bigger than a walnut, if introduced within the vagina, may be distended by means of the syringe with tepid water or air. It may be inflated or distended so as to become equal in size to a small foetal head, and if the distension be gradually and very slowly effected it will not necessarily produce any distressing or painful sensation.